

AF/1743

Docket No. 60326/PJP



Application of : Carolyn E. Mountford et al.
 Serial No. : 09/691,776
 Filed : October 18, 2000
 For : MAGNETIC RESONANCE SPECTROSCOPY OF
 BREAST BIOPSY TO DETERMINE PATHOLOGY,
 VASCULARIZATION AND NODAL INVOLVEMENT

Mail Stop AF
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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S I R:

Transmitted herewith is an amendment to the above identified application.

 X Small entity status of this application under 37 C.F.R. \$1.9 and \$1.27 has been established by a verified statement previously submitted.

 A verified statement to establish small entity status under 37 C.F.R. \$1.9 and \$1.27 is enclosed.

 No additional fee is required.

The filing fee is calculated as follows:

	NUMBER AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE				FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY	
Total Claims	26	-	26	=	0	X	9	18	=	0		
Independent Claims	8	-	8	=	0	X	40	80	=	0		
Multiple Dependent Claim(s) Presented <u> </u> Yes <u> X </u> No							130	260				
For First Time							TOTAL ADDITIONAL FEE					
							\$0					

*If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.

**If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.

***If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than "0", write "0" in the space.

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Amendment Transmittal Letter
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The "HIGHEST NUMBER PREVIOUSLY PAID FOR" (Total or Independent) is the highest of the "NUMBER AFTER AMENDMENT" in any prior amendment of the number of claims as originally filed

_____ Please charge Deposit Account No. _____ in the amount of \$ _____. Three copies of this sheet is enclosed.

_____ A check in the amount of \$ _____ is enclosed.

X The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposition Account No. 03-3125 . Three copies of this sheet are enclosed.

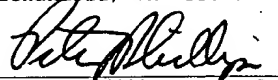
X Any filing fees under 37 C.F.R. \$1.16 for the presentation of extra claims.


X Any patent application processing fees under 37 C.F.R. \$1.17.

Respectfully submitted,

I hereby certify that this correspondence is being deposited this date with the U.S. Postal Service with sufficient postage as first class mail in an envelope addressed to:

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 12/9/03
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